IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:)	Group Art Unit: 2811
Shunpei YAMAZAKI et al.)	Examiner: S. Crane
Serial No. 09/535,015)	CERTIFICATE OF MAILING I hereby certify that this correspondence is
Filed: March 24, 2000)	being deposited with the United States Posta Service with sufficient postage as First Class
For: METHOD OF MANUFACTURING A)	Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450
SEMICONDUCTOR DEVICE)	Alexandria, VA 22313-1450, or 2-9-05
		adili M Stangy

INFORMATION DISCLOSURE STATEMENT

Honorable Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In accordance with the provisions of 37 C.F.R. 1.56 and 37 C.F.R. 1.97-1.99, Applicant submits herewith a Form PTO-1449 listing information known to Applicant and requests that this information be made of record in the above identified application. Copies are submitted herewith in accordance with 37 C.F.R. 1.98(a).

A check in the amount of \$180 is being submitted to comply with the provisions of 37 C.F.R. § 1.97(c).

Respectfully submitted,

Eric J. Robinson

Reg. No. 38,285

Robinson Intellectual Property Law Office, P.C. PMB 955 21010 Southbank Street Potomac Falls, Virginia 20165 (571) 434-6789

02/14/2005 RFEKADU1 00000043 09535015

180.00 OP

PTO/SB/17 (10-04v2)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Date

2-9-05

Inder the Paperwork Reduction Act of 1995, no persons are	e required to respond to a collection of information unless it displays a valid OMB control number.			
2.7	Complete if Known			
FEE TRANSMITTAL	Application Number 09/535,015			
44 f a a X 1	Filing Date March 24, 2000			
'&/ TORTI 2003	First Named Inventor Shunpei YAMAZAKI et al.			
Effective 1/01/2004. Patent fees are subject to annual revision.	Examiner Name S. Crane			
frankling ant Claims small entity status. See 37 CFR 1.27.	Group Art Unit 2811			
TOTAL AMOUNT OF PAYMENT (\$) 180.00	Attorney Docket No. 0756-2131			
METHOD OF PAYMENT	FEE CALCULATION (continued)			
1. The Commissioner is hereby authorized to charge indicated	3. ADDITIONAL FEES			
fees and credit any overpayments to:	Large Small			
	Entity Entity			
Deposit Account 50-2280	Fee Fee Fee Code (\$) Fee Description Fee Paid			
Number	1051 130 2051 65 Surcharge – late filing fee or oath			
	1052 50 2052 25 Surcharge – late provisional filing fee or cover sheet			
Deposit Account Robinson Intellectual Property	1053 130 1053 130 Non-English specification			
Name Law Office	1000 1000 1000 1000 1000 1000 1000 100			
	1812 2,520 1812 2,520 For filing a request for ex parte reexamination			
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 and	1804 920* 1804 920* Requesting publication of SIR prior to Examiner action			
credit overpayments	1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action			
Applicant claims small entity status.	1251 120 2251 60 Extension for reply within first month			
- See 37 CFR 1.27				
2. E Payment Enclosed:	1252 450 2252 225 Extension for reply within second month			
Check Credit Card Money Other	1253 1020 2253 510 Extension for reply within third month			
Order	1254 1,590 2254 795 Extension for reply within fourth month			
FEE CALCULATION	1255 2,160 2255 1080 Extension for reply within fifth month			
1. BASIC FILING FEE	1401 500 2401 250 Notice of Appeal			
Large Entity Small Entity Fee Fee Fee Fee Fee Description	1402 500 2402 250 Filing a brief in support of an appeal			
Code (\$) Code (\$) Fee Paid	1403 1000 2403 500 Request for oral hearing			
1001 300 2001 150 Utility filing fee	1451 1,510 1451 1,510 Petition to institute a public use proceeding			
1111 500 2111 250 Search fee	1452 500 2452 250- Petition to revive – unavoidable			
1311 200 2311 275 Examination fee	1453 1,500 2453 750 Petition to revive – unintentional			
Over 100 Sheets/250 for each additional 50	1501 1,400 2501 700 Utility issue fee (or reissue)			
	1502 800 2502 400 Design issue fee 1503 1100 2503 550 Plant issue fee			
	1462 400 1462 400 Petitions, Group I			
SUBTOTAL (1) (\$)	1463 200 1463 200 Petition, Group II			
	1464 130 1464 130 Petitions, Group III 1807 50 1807 50 Processing fee under 37 CR 1.17(q)			
2. EXTRA CLAIM FEES Fee from	1806 180 1806 180 Submission of Information Disclosure Stmt \$180.00			
Extra Claims below Fee Paid				
Total Claims -20** = X \$50 =	8021 40 8021 40 Recording each patent assignment per property (times number of properties)			
Independent -3** = X \$200 = Claims	1809 790 2809 395 Filing a submission after final rejection (37 CFR § 1.129(a))			
Multiple Dependent =	1810 790 2810 395 For each additional invention to be examined (37 CFR			
Large Entity Small Entity	§ 1.29(b)) 1801 790 2801 395 Request for Continued Examination (RCE)			
Fee Fee Fee Fee Description				
Code (\$) Code (\$)	1802 900 1802 900 Request for expedited examination of a design application			
1202 50 2202 25 Claims in excess of 20	Other fee (specify)			
1201 200 2201 100 Independent claims in excess of 3				
1203 360 2203 180 Multiple dependent claim, if not paid	• Reduced by Basic Filing Fee Paid SUBTOTAL (3) (5) 180.00			
1204 200 2204 100 ** Reissue independent claims over				
original patent 1205 50 2205 25 ** Reissue claims in excess of 20 and	CERTIFICATE OF MAILING			
over original patent	I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria,			
SUBTOTAL (2) (\$)	VA 22313-1450, on 2-9.05 add M Stamper			
••or number previously paid, if greater; For Reissues, see above				
SUBMITTED BY	Complete (if applicable)			
Name (Print/Type) Eric J. Robinson	Registration No. 38,285 Telephone (571) 434-6789			
traine (Frint Type)	(Attorney/Agent)			

Signature

lease type a plus sign (+) inside this box → [+]

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO			·	Complete if Known		
INFORMATION DISCLOSURE				Application Number	09/535,015	
STATEMENT BY APPLICANT		Filing Date	March 24, 2000			
		First Named Inventor	Shunpei YAMAZAKI et al.			
(use as many sheets as necessary)			ssary)	Group Art Unit	2811	
		Examiner Name	S. Crane			
Sheet	1	of	1	Attorney Docket Number	0756-2131	

U.S. PATENT DOCUMENTS						
Examiner (Cite No.1	U.S. Patent Doc	cument	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant
			Kind Code ² (if known)			Figures Appear
		5,132,754		Serikawa et al.	07/21/1992	
	<u> </u>					
	-					
	 					
		,				
	 					
	1					

FOREIGN PATENT DOCUMENTS									
Examiner Initials	Cite No.1	Fo	reign Patent D	ocument		Name of Patentee or	Date of Publication of Cited Document	Pages, Columns, Lines, Where Relevant Passages	T⁵
		Office ³	Number ⁴	Kind Code (if know		Applicant of Cited Document	MM-DD-YYYY	or Relevant Figures Appear	
					<u> </u>				

Examiner	Da	ate
Signature	C	onsidered

^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.